



Missouri Pharmacy Program – Preferred Drug List



GLP-1 Receptor Agonists

Effective 07/05/2007

Revised 07/03/2008

Preferred Agents

- Byetta[®]

Non-Preferred Agents

Approval Criteria	Denial Criteria
Documented or inferred diabetes mellitus diagnosis <ul style="list-style-type: none">○ Oral hypoglycemic agent (at least 1 prescription)	Therapy will be denied if no approval criteria are met
	Drug Prior Authorization Hotline: (800) 392-8030.